

## APPLICATION DATA SHEET

### Application Information

Application Number::

Filing Date:: February 20, 2002

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)?:

Number of Copies of CRF::

Title:: NETWORK COMMUNICATION AND  
MESSAGE PROTOCOL FOR A MEDICAL  
PERFUSION SYSTEM

Attorney Docket Number:: 032722-650

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure:: \*

Total Drawing Sheets:: \*

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:

10078493-022102  
201220-018201

## **Applicant Information**

Applicant Authority Type::

Primary Citizenship Country::

Status::

Given Name::

Middle Name::

Family Name::

Application Identifier: 032722-650

Name Suffix::

City of Residence::

State or Province of Residence::

Country of Residence::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing

Address::

## **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number:: (703) 836-6620

Fax Number: (703) 836-2021

## **Representative Information**

Representative Customer Number:: 21839

10078493-022107  
201220-56487001

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	09/030,989	02/26/98
09/030,989	Continuation	08/723,504	09/30/96

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee Name:: Terumo Cardiovascular Systems Corporation  
Street of Mailing Address:: 6200 Jackson Road  
City of Mailing Address:: Ann Arbor  
State or Province of Mailing Address:: MI  
Country of Mailing Address::  
Postal or Zip Code of Mailing Address::  
Address:: 48103-9300